Aids prevalence amongst adults and children

1884. SHRI NARENDRA MOHAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether any study has been made to find out prevalance of AIDS amongst adults and HIV positive amongst children;

(b) if so, the results thereof and efforts (preventive and remedial) being made;

(c) whether any guidelines have been issued to State Governments to adopt a specific line of action for tackling the deadly disease; and

(d) whether any separate allocations have been made in the past and what are the further plans adequately to meet this situation?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DALIT EZHILMIALAI): (a) No specific study has been undertaken, but reported AIDS cases among adults and children below 14 years up to April, 1998 are 5209.

(b) No study has been conducted and, as such, the question of result does not arise. The following efforts are being made to check the spread of disease—

—strengthening of State AIDS Cell,

—awareneess camping through various media units like electronic, press, intcr-pcrsonal communication, folk media and other area specific approach,

—strengthening of STD Climics,

—rruKlcrnisatkxii of Blood Banks and Universal screening of Blood Donrs.

(c) Guidelines have been issued to all StStc Governments and Union Territories to adopt specific line of action for tackling the disease which forms the strategy of the National AIDS Control Programme.

(d) Yes, Sir. Allocation for the control of IV/AIDS has been made in the past. In future, depending on the strategic plan of implementation submitted by each State, allocation will be made.

Prc-Mcdical test for Admission to Medical Colleges

1885. SHRIMATI BASANTI SARMA:
DR. SHRIKANT RAM CHANDRA JICHKAR:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the Supreme Court has held that a Pre-Medical Test should be held in all the States for admission to medical colleges;

(b) if so, what are the details of the said judgement;

(c) if not, what is the present position in the country vis-a-vis the PMT; and

(d) what is the response of the Government of India to the demand of the students in Maharashtra for not imposing a PMT on them?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DALIT EZHILMALAI): (a) to (c) The Supreme Court of India in W.P. No. 607 of 1992 Unni Krishnan J.P. Vs State of Andhra Pradesh held that atlest, 50% of the Seats in every private professional College shall be filled by the nominees of the Government or University, as the case may be, which will be called 'Free Seats'. These Students shall be selected on the basis of merit, determined on the basis of a Common Entrance Examination, where it is held or in the absence of an enterence examination, by such criteria as may be determined by the competent authority or the appropriate authority, as the case may be. It is, however, desirable and appropriate, to have a Common Entrance Exam for regulating admissions to these Colleges/Institutions, as is done in the State of Andhra Pradesh. In view

of this Judgement, the position varies from State to State. It has been informed by the Government of Maharashtra that in W.P. No. 649/97 Ravindra Kumar Rai Vs. State of Maharashtra the Supreme Court has directed the Government of Maharashtra to held a Common Entrance Examination for admission to Colleges in Maharashtra, for the year 1998, in accordance with the Regulation of Graduate Medical Education, made by the Medical council of India.

(d) It is for the Government of Maharashtra to take a decision in the matter, keeping in view the directions of the Supreme Court in W.P. No. 649/97.

Programmes to eradicate T.B.

1886. DR. B.B. DUTTA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government celebrated the tuberculosis eradiction day on 24th March, 1998;

(b) if so, the details thereof alongwith the new programmes launched to eradicate T.B.;

(c) whether it is a fact that a recent WHO study has slammed the country as one of the 'hot zones' for the deadly multi-drug resistant T.B. (M.D.R.-T.B.);

(d) if so, the details thereof; and

(e) the action plan of Government to meet the WHO deadline of 2000 AD for the universal implementation of DOTS?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DALIT EZHILMALAI): (a) and (b) Yes, Sir. World T.B. Day -is observed to commomorate the discovery of T.B. Germ by Robert Koch, on this day. Continuing Medical Education Programmes were organised on this day, at the Central level and at the District Headquarters of all the 39 Revised National Tuberculosis Control Programme (RNTCP) Districts taken up in the first year of the World Bank Project.

The new TB Programme (RNTCP) which was launched on 26th March, 1997, envisages an achievement of at least 85% Cure Rate, as against existing Treatment Completion Rate of about 30%.

(c) No, Sir.

(d) Does not arise.

(e) WHO's deadline of covering all the Countries with DOTS by 2000 AD will not met by India. India envisages to 102 Dfctricts with a Population of 271.2 million, in the next three years in a phased manner.

Financial support to popularise Laproscopic Surgery

1887. SHRI PARAG CHALIHA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government have taken any steps to popularise and subsidise laproscopic surgery in India;

(b) if so, the details thereof;

(c) whether Government are considering sanction of financial and other kind of support therefor in Assam and other States of the N.E. region; and

(d) if so, the details thereof and if not, the reasons therefor?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DALIT EZHILMALAI): (a) and (b) Central Government Hospitals in Delhi have facilities for Laproscopic Surgery. Free Laproscopic Surgery is conducted when surgery is considered necessary as per medical advice, and after obtaining the consent of patient concerned.

(c) No, Sir.

(d) 'Health' is a State subject and it is for the concerned State Government to consider sanctioning financial and other kind of support for popularising and subsidising Laproscopic Surgery.